



OCT 19 2006 8:30 AM PTM/TRADEMARK OFFICE

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P.01/01

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Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
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7540 09/22/2006

HEWLETT-PACKARD COMPANY
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<i>Laurie Morgan</i>	(Depositor's name)
<i>Laurie Morgan</i>	(Signature)
<i>10/19/06</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/852,263	05/10/2001	Manuel Gonzalez	60006758-1	5454

1. NATURE OF INVENTION: SYSTEM AND METHOD FOR SELECTING A PAPER SIZE FOR PRINTING AN IMAGE FILE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/22/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
GRANT II, JEROME	2625	358-001200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 _____
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2. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Hewlett-Packard Development Company, L.P.

Houston, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed. *08-2025*
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 The Director is hereby authorized to charge the aforesaid fee(s), any deficiency, or credit any overpayment, to Deposit Account Number *37954* (Enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Laurie Morgan*Typed or printed name *DAVID S. THOMPSON*Date *19 Oct 2006*Registration No. *37,954*

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